

McMahon was one of several speakers at the first-ever Memorial Day service at the new Omaha National Cemetery in Sarpy County. Hundreds turned out for the ceremony.

The Air Force Heartland of America Band played patriotic tunes. As the band played the familiar strains of "The Marine Corps Hymn" or "Anchors Away," the U.S. Navy song, members of each respective branch stood and were applauded.

"There are no greater armed forces on the planet than ours. Period," McMahon said. "I don't say that with emotion. I don't say that with hyperbole. It is just a fact."

McMahon and other speakers noted the names of several fallen service members. They spoke of Kyle Milliken, a Navy SEAL killed during a raid in Somalia earlier this month. Of Army Spc. Etienne J. Murphy, who died in a vehicle rollover in northern Syria on Friday.

Air Force veteran Felix Ungerman, the deputy chief of staff for U.S. Rep. Don Bacon, said he's still saddened by the loss of his college roommate, Air Force 1st Lt. Carlos A. Arriaga. He died in a 1995 plane crash. He also asked the audience to keep in mind those who have died by military suicide.

"Remember and speak those names as often as you can," Ungerman said, referring to those who have died in service. "Not just today, but every day."

Retired Army Sgt. 1st Class Robert Nicholas attended the ceremony and said he was impressed by the turnout at the new military cemetery.

"Remember those few who gave all," he said.

Rose Madsen made the trek out to the Omaha National Cemetery on Sunday to prepare her husband's grave, and came out again for the commemorative event on Monday.

"It's a beautiful place," she said. "I'm so pleased to see so many people out here."

Her husband, Paul Madsen, an Air Force pilot, served in World War II and Vietnam before retiring to work for the Department of Veterans Affairs. He died in 2010 and was recently transferred to the cemetery.

"Military service was his thing," she said. "Flying was his thing."

Dal Vogel came out as part of the Patriot Guard Riders, motorcyclists who provide escorts at military funerals and attend other veteran events. Vogel is a Navy veteran who served in Vietnam.

"I think (Memorial Day) means a lot the older you get, when you think about what veterans have done for our country," he said.

In cemeteries across the region, families and friends knelt at graves, laid bouquets of red, white and blue carnations, and planted miniature American flags.

The American Legion Omaha Post No. 1 held an all-faith service at Forest Lawn Memorial Park that included a wreath-laying ceremony and a flyover by the Omaha Police Department helicopter.

Just a sliver of the nation's population serves in uniform today, said Maj. Gen. Michael Navrkal of the Army National Guard. World War II veterans are rapidly aging.

"Men and women have volunteered to keep this nation safe for generations," he said. "They came from every race and religion, from farms to cities and from the suburbs. From every imaginable walk of life. These great Americans answered our nation's call when we needed them most."

Bacon, who served 29 years in the Air Force, was the main speaker.

An estimated 1.2 million Americans have died in war, he said. Each was loved. Each was grieved.

"We owe them our gratitude for what we have today," Bacon said.

At South Omaha's Brown Park, a brief observance preceded the 45th annual Colin-Orcutt Memorial All-Star Game between American Legion players from the Omaha metro area. More than 300 people stood as American Legion Post 1 honor guard members presented flags from the Army, Marine Corps, Navy, Coast Guard and Air Force as the hymns of each played over loudspeakers.

Then four men from American Post 331 honor guard walked across the grass with the U.S. flag for the national anthem. They stopped between the pitcher's mound and home plate, facing the bleachers where the crowd stood, men with ball caps over their hearts. American Legion Riders motorcyclists created a backdrop of flags.

After the anthem, Bill and Evonne Williams were honored for their work organizing Honor Flights of veterans to Washington, D.C., and assembling "Remembering Our Fallen" displays preserving the stories of American service members killed in Iraq and Afghanistan. Vietnam veterans Terry White, Doc Holiday and John Freimuth, who had gone on Honor Flights, presented a plaque and flowers to the couple.

Earlier, the Legion raised a new WWI flag, adding to a row of war memorials at the ballfield.

Then they played ball.

Members of the Harry Bossard American Legion Post 32 laid a memorial wreath in Veterans Park in Papillion.

Flanked by walls covered with the names of Sarpy County veterans, Gregory Bendon, post commander, urged parents to teach their children the importance of respecting veterans.

"The simple words of 'Thank you for your service' goes a long way," Bendon said.

Born and raised in Papillion, Army veteran Fritz Weiss said Veterans Park means a lot to him.

"The names on these walls? I can just about tell you everyone who's on there."

Mike Neuzil, whose name is on one of the walls, said it's taken him years of healing to speak about his time in Vietnam. When he got back to the States, he put his Purple Hearts in a box

under the bed, wanting to forget everything. But he said he's found some closure through events such as the Honor Flight.

"We're the lucky veterans," Neuzil said. "There are others who didn't make it. Lot of those guys saved our lives."

World-Herald staff writers Christopher Burbach and Natalia Alamdari contributed to this report.

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1.6 - The Gazette (Video): [Death of Colorado Springs Marine prompts congressman's call for probe](#) (30 May, Tom Roeder, 873k online visitors/mo; Colorado Springs, CO)

The death of a Colorado Springs Marine profiled in Sunday's Gazette has prompted a measure before Congress that mandates an outside investigation into the Department of Veterans Affairs handling of suicidal patients.

Aurora Republican U.S. Rep. Mike Coffman said his measure would require the National Academies of Science, Engineering, and Medicine review veterans' deaths within the last five years related to drug overdoses or suicide.

"I'm still haunted by the situation with Noah Harter," Coffman told The Gazette on Tuesday.

Harter, 25, died in 2015 after visiting VA's Floyd K. Lindstrom Clinic in Colorado Springs for depression and "suicidal ideation." Although VA identified Harter as a high risk suicidal patient, he was sent home after the visit with a powerful anti-depressant and no scheduled follow-up appointments.

VA blamed the fatal lack of follow-up on a scheduling software glitch.

Coffman said the VA is over-reliant on drugs to treat mental illness and lax in its follow-up, which he said contributed to Harter's death.

"I think there are a lot more tragedies like Noah Harter out there," he said.

The congressman's bill is off to a strong start, with bi-partisan support in the House and backing from Arizona Republican Sen. John McCain in the upper chamber.

In its most recent statistics, VA says 20 veterans die by suicide every day, including six who had received VA services.

A Marine veteran, Coffman is all too familiar with the invisible wounds of war. After serving in the 1991 Persian Gulf War, the congressman said he came home to feelings he'd never experienced before.

"It was the emptiest feeling I have ever felt in my entire life," he said.

Coffman has led an effort this year to reform VA, backing bills that increased veteran access to private care, encouraged stronger discipline in the agency's ranks and covered mental health care for all combat veterans regardless of their discharge status.

He's spent more than a year studying Noah Harter's death.

Harter, a graduate of Rampart High School, left the Marines in 2011. He was attending the University of Colorado at Colorado Springs and looking forward to a career in business.

But the nearly 300 combat missions he had served in Iraq and Afghanistan left him battling post-traumatic stress, depression and insomnia.

Coffman said Harter's courage in admitting his struggle and seeking VA care is notable.

"He had to be in a bad situation to go in there and ask for help," he said.

The VA completed, but will not release an internal review of Harter's death. Coffman, through the House VA, ordered a congressional investigation, but the agency hasn't been cooperative, he said.

VA is pushing against Coffman's measure to get an outside probe of suicides and overdose deaths.

"The VA is saying it is unnecessary," Coffman said.

Representatives of the agency told Coffman they have conducted exhaustive suicide studies already and the external probe would just pile more paperwork on the problem. Coffman remains suspicious.

"If they are aware of it why haven't they changed their practices?" he asked.

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1.7 - The Intelligencer: [VA secretary asked to OK non-vet Bucks doctor's burial at Washington Crossing National Cemetery](#) (30 May, Peg Quann, 154k online visitors/mo; Doylestown, PA)

Dr. Amy Reed's husband hoped the Veterans Administration would allow her to be buried at Washington Crossing National Cemetery in honor of her efforts to prevent other women from dying the way she did.

Instead, she will be buried at the Newtown Cemetery in Newtown Township on Thursday.

Dr. Hooman Noorchashm received word Tuesday night from Ronald E. Walters, the VA's interim under secretary for Memorial Affairs, that the VA denied his appeal of its earlier decision denying a request that his wife be buried at Washington Crossing.

Noorchashm said he understands that veterans and military personnel may not agree that national cemeteries should be used for those who did not serve in the military. But, he added,

having his wife buried there in honor of her efforts to end a surgical method that was harming and killing women would not disrespect the heroes of military service.

Both Bucks County Congressman Brian Fitzpatrick and Congresswoman Louise Slaughter of New York had sent petitions to the VA to have Reed buried in the Upper Makefield national cemetery, which is close to her family in Lower Makefield, Noorchashm said.

Representatives for Fitzpatrick and Slaughter as well as the Veterans Administration could not be reached for comment Tuesday.

"What Amy did was significant in saving lives," Noorchashm said. "The law permits the VA secretary to do such a thing. ... There's precedent for it."

He hoped that the more than 500 emails sent to the Veterans Administration in support of the request would have helped.

"It's rare, but it does happen," that someone who does not meet the military or dependent qualifications for burial in a military cemetery is buried there through a special exception, said Gregory Whitney, director of the Washington Crossing cemetery. But in the three years that he has supervised Washington Crossing, he said no special exceptions have been made there.

Reed, 44, died May 24 of uterine cancer that was spread through her body by a morcellator used during a hysterectomy in 2013 for uterine fibroids, her husband said. The device minced her uterus and the fibroids before they were laproscopically removed but also spread the cancer through her abdominal cavity, Noorchashm said.

Since her metastasized cancer was detected, Reed — an anesthesiologist and critical care specialist at the Hospital of the University of Pennsylvania — and her husband, a cardiothoracic surgeon, worked to have morcellators removed from use for hysterectomies. Through their efforts — combined with the support of Slaughter, Fitzpatrick and his brother, former congressman Mike Fitzpatrick — the FDA issued a warning about the devices in 2014.

Noorchashm said his wife received letters from women who were spared the use of the morcellator because of her fight, and he said countless other women have benefited and will continue to benefit.

"Here's a citizen of the United States who has saved lives across the nation. ... This is a fact of history now," Noorchashm said.

Reed, a mother of six children, will be remembered at a viewing from 4 to 8 p.m. Wednesday at the Church of St.

Andrew in Newtown Township and at an 11 a.m. funeral Mass Thursday at the Cathedral Basilica of SS. Peter and Paul in Philadelphia, preceding her burial in Newtown Cemetery.

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2. Veteran and Employee Experience

2.1 - Breitbart: [Mike Pence Sends Project Hero Riders Off on 10th Memorial Day Ride for Veterans](#) (29 May, Michelle Moons, 19.1M online visitors/mo; Los Angeles, CA)

WASHINGTON, D.C. — Vice President Mike Pence honored veterans this Memorial Day from his residence at the Naval Observatory, where about 200 vets attended and Project Hero launched its 10th Annual Memorial Day bike ride to Virginia Beach. Pence stepped out and greeted the close to 100 riders to cheers from the crowd. He was joined by Karen Pence and Veterans Affairs Secretary David Shulkin.

Project Hero President John Wordin addressed the crowd, noting it was the fourth year in a row the ride began at the Vice President's residence. He pointed out the problem of suicide among veterans and Shulkin's work in partnership with Project Hero to address it.

Shulkin told the crowd, "If it's for veterans, they're going to be there for us." He continued, "Both he and Karen are passionate and relentless when it comes to veterans' issues."

Pence then took to the podium saying, "This is a day we remember those who served and did not come home...To be able to welcome you here on this most hallowed of days is profoundly humbling to Karen and I." The Vice President thanked the veterans in attendance for their service and thanked Project Hero.

"We'll be joining the president in just a few moments at Arlington National Cemetery," said Pence, adding that he and Karen, as avid cyclists themselves, were slightly jealous of the riders who would be setting out for Virginia Beach shortly.

he Vice President took a moment to hail the President's recent "extraordinary trip" to Europe and the time he spent with military troops in Italy. He highlighted Trump's veteran health care executive order. Pence also lauded Project Hero's work when it comes to the "unseen wounds" and prevalence of PTSD.

Pence wished the riders "Godspeed, safe travels all the way to Virginia Beach and for Project Hero and all of those that it helps all the way to a full recovery in an America that cherishes all those who serve."

Second lady Karen Pence offered a brief prayer directly after her husband concluded his message. She encouraged the riders to take oranges and bananas that were set out for them.

Vice President and Mrs. Pence as well as Shulkin were presented with blue Project Hero biking jerseys to commemorate the ride. "That'll give me a year to fit into it," joked Pence.

Project Hero is a national nonprofit which describes itself as an "organization dedicated to helping Veterans and First Responders affected by PTSD, TBI and injury achieve rehabilitation, recovery and resilience in their daily lives and increasing awareness to combat the national mental health emergency posed by PTSD and TBI."

Riders set out from the Vice President's residence shortly after Pence departed to join President Donald Trump for a ceremony at Arlington National Cemetery. The riders headed toward their Virginia Beach destination.

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2.2 - Daily Caller: [Trump Fired A Corrupt VA Official. Then The VA Stepped In And Said Not So Fast](#) (29 May, Luke Rosiak, 11.8M online visitors/mo; Washington, DC)

A notoriously corrupt Department of Veterans Affairs (VA) manager fired in the first day of President Donald Trump's presidency — to rousing acclaim from veterans who heralded it as a sign of lasting reform — has been returned to work by VA officials after he filed a civil-service protections appeal.

The return of the Puerto Rico hospital director is the latest example of Trump's reform efforts encountering the entrenchment of what he has called Washington's swamp, and comes in the same month a court ruled that the VA may not even be able to fire the Phoenix hospital director, who is a convicted felon as a result of job-related misconduct.

"On the morning of January 20, 2017, the Department removed DeWayne Hamlin, the director of the VA Caribbean Healthcare System, from the federal civil service. Mr. Hamlin subsequently appealed his removal to the Merit Systems Protection Board (MSPB), and because of particulars in his case that remains under active litigation, he was brought back to work at VA," spokesman James Hutton told The Daily Caller News Foundation.

"As we have underscored since January 20, President Trump and Secretary [David] Shulkin have made employee accountability at VA a top priority, and we will continue to take appropriate disciplinary actions with our employees. The Secretary in this case was not able to overturn this decision once he was made aware of it. We need this ability in new legislation."

Hamlin was returned to work at the VA despite the attempted firing of whistleblower Joseph Colon, who alerted officials that Hamlin was arrested for intoxicated driving and found with painkiller pills for which he didn't have a prescription. Diversion of opiates from the VA system for recreational purposes is a major problem at the VA.

Worse, when a subordinate enraged him by refusing to carry out the wrongful firing, that subordinate, Rosayma Lopez, was offered \$300,000 in taxpayer money to quit—which would have been the largest settlement in recent department history. Lopez refused to take the cash.

The incidents were just one of many serious problems at the Puerto Rico veterans hospital Hamlin led, including chronic absenteeism. But even after all of those incidents, former President Barack Obama's VA Secretary Bob McDonald flew Hamlin to Washington to shape other managers in his image at a "Leaders Developing Leaders" seminar.

Hamlin was fired Jan. 20, the day of President Trump's inauguration. But numerous employees of the Puerto Rico VA told TheDCNF they were shocked and disgusted to see him return to the facility this month.

VA lawyers were coy, writing on May 9 that "No, Mr. Hamlin is certainly not back on his job... we are waiting on a new hearing date from the judge at the moment."

But pressed to explain the sightings, Hutton acknowledged he was "brought back to work at VA." Hutton did not say what his job title is, but he is not listed as the hospital's director.

Secretary Shulkin has increasingly faulted the MSPB for interpreting civil service rules in a way that blocks discipline of employees even when there is a slam-dunk case demonstrating severe misconduct.

He has pleaded for legislation making it easier for managers to deal with problem workers, but proposals have frequently stalled in the Senate under Committee on Veterans Affairs Chairman Sen. Johnny Isakson of Georgia.

Hutton told TheDCNF: "As this demonstrates, more needs to be done. VA will continue to work with Congress on priority legislation that will ensure the Department can appropriately manage its employees at all levels, to ensure accountability, especially in cases when employees are derelict in their duties or fail to care for Veterans."

But Hutton did not respond to facts that suggest that less-than-aggressive efforts by top VA officials to fire employees, rather than the MSPB, may have a role in the return. Although the outside body does sometimes overturn discipline, it is up to VA managers to zealously build and prosecute cases.

In fact, the MSPB has not even ruled on Hamlin's case. And the case for firing that the VA presented did not even include some of the worst and most easily provable of his conduct.

"I do not know why the charges do not include my detail, the bribe he committed when he offered me \$305,000 to quit, and other things such as his DUI. I feel that the VA did this soft proposal removal so he could return to the VA," Lopez wrote to VA lawyers, according to emails obtained by TheDCNF.

The Office of Special Counsel, a federal agency that is separate from the VA, has taken multiple years to determine whether Hamlin's actions constitute whistleblower retaliation.

They have still not ruled, and it is possible that the VA intends to fire Hamlin again once they can cite an outside agency as evidence. But it is unclear why the agency has brought him back rather than fighting the existing MSPB battle as aggressively as possible.

VA managers have frequently seemed inclined to fold when faced with the prospect of unwieldy litigation brought by fired employees—who sometimes use a loophole to bill their personal lawyers to taxpayers.

Former Deputy Secretary Sloan Gibson agreed to pay Japhet Rivera, a former Hamlin deputy, \$85,000 to quit after he contested being fired by an Illinois hospital for rarely showing up to work, taunting an intern with the fact that he had sex with her mother—who was also an employee—and threatening to fire an employee who told on him. Thanks to the fact that the VA agreed to a settlement rather than fighting for a firing, Rivera is now undersecretary of the Puerto Rico Department of Health.

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2.3 - The Denver Post: [Veterans Affairs must solve its growing drug-theft problem](#) (30 May, Editorial Board, 4.8M online visitors/mo; Denver, CO)

What a grim story to read the day after Memorial Day: The problem of stolen opioid and other drugs remains a serious and growing one at our nation's hospitals and clinics for military veterans.

Coloradans well know that such thefts, also called drug diversions, can lead to frightening situations in which patients face infections from those stealing the drugs. Drug diversions have troubled Colorado private hospitals in recent years. In addition to infection risks, patients recovering from surgery and otherwise dealing with extreme pain are left to suffer as a result of a thief's search for a fix.

Veterans hospitals are seeing the problem in much greater numbers. The Associated Press has found that the rate of stolen drugs from Veterans Affairs hospitals is twice what occurs in private facilities. Federal officials say the VA's large stockpiles of drugs and high volume of patients at its facilities contribute to the problem. As Jeffrey Hughes, the acting VA assistant inspector general for investigations, told The AP, "Veterans may be denied necessary medications or their proper dosage and medical records may contain false information to hide the diversion, further putting veterans' health at risk."

The AP reported in February about the growing problem. Drug losses or thefts increased from 237 in 2009 to 2,844 in 2015. In only 3 percent of cases were VA staff disciplined. The VA responded with a "zero tolerance" policy that hasn't yet proved successful.

The VA inspector general's office says that it had opened 25 investigations since the start of the federal budget year, or Oct. 1. That's a rise from 21 the year before.

A big problem for the VA has been tracking the dangerous drugs. Michael Glavin, an IT specialist with the VA, told journalists of several employee complaints about flawed tracking systems for the drugs and drug inventories that wreak havoc for those trying to hold the system accountable. The problems translate into months of delays in determining when drugs are stolen or otherwise go missing. What's more, prescription drugs aren't always inventories when they arrive at a VA facility.

VA officials say they check inventory every three days and keep the drugs secure. They argue that some of the missing drugs are just that — lost in shipment and not the result of anything nefarious.

Officials also say they have stepped up inspections and employee drug tests.

We've been frequent critics of the VA's problems in Aurora for blowing past its budget to build a new hospital by more than a billion dollars and extending its opening date for years.

Plenty have called for more accountability from the top down, and against that backdrop we've seen the VA struggle with efforts to attract and keep talented medical professionals.

President Donald Trump has inherited a mess with the VA, and we hope his administration is able to do some good and right this ship. Our nation's warriors must be able to rely on the promised medical care the VA is charged with providing.

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2.4 - The Fiscal Times: [How Bad Is Drug Theft at VA Hospitals? Feds Pursue Dozens of New Cases](#) (30 May, Eric Pianin, 1.5M online visitors/mo; New York, NY)

The Trump administration has vowed to step up efforts to address a nationwide opioid and heroin addiction epidemic – one that claims the lives of more than 33,000 people annually -- by appointing a new commission headed by New Jersey Gov. Chris Christie and distributing grants authorized during the Obama administration.

But the president might also take a closer look at the slipshod security operations at Veterans Affairs hospitals and health care centers across the country, where doctors and professional staffers have been pilfering prescription drugs for personal use or sale on the black market.

Between Oct. 1 and May 19, the VA inspector general's office opened 36 criminal investigations into alleged drug theft by employees at veterans hospitals, according to a report by the Associated Press. That brings to 108 the number of open criminal investigations involving allegations of prescription drug theft by government employees at these hospitals.

Secretary David Shulkin has received kudos for improvements within the long-troubled VA bureaucracy since taking the reins early this year. He said during an interview on Fox News on Memorial Day that the VA has made important strides in reducing wait times for patients. And the VA's suicide hot-line operation has also been improved.

But the rash of prescription drug thefts by doctors, nurses or pharmacy staff throughout the VA's 160 medical centers and 1,000 clinics appears to be a tough nut to crack.

Shulkin and his top aides declared "zero tolerance" of drug thefts at VA facilities after the AP first reported in February on a substantial increase in reported cases of theft or missing drugs since 2009. Yet there seems to be no way for the administrators to stamp out a practice overnight that apparently is endemic to VA hospital operations.

Prescription drug thefts have long been a reality of life in both government-run health care facilities and private hospitals amid the rising demand for illegal drugs and the large illegal profits that can be made. Yet the problem appears to be more prevalent within the VA system than in private hospitals.

According to the AP's Hope Yen, separate Drug Enforcement Administration data shows that "the rate of reported missing drugs at VA health facilities was more than double that of the private sector" – an alarming trend.

DEA investigators have proffered the explanation that there are simply more drugs being kept in storage at large VA medical centers to treat high volumes of patients than at private hospitals, increasing the opportunity for theft. Some critics cite faulty inventory systems that make it harder to determine when drug thefts occur.

Whatever the explanation, Congress is likely to take a closer look at the problem when it returns from its lengthy Memorial Day recess next week. Sen. Marco Rubio (R-FL) told the AP he was greatly troubled by the latest revelations of widespread drug theft. He said he will press for Senate approval of bipartisan legislation he is co-sponsoring to provide the VA with "the tools needed to dismiss employees engaged in misconduct."

The federal government takes seriously these drug theft cases although administrative action and criminal prosecution has been uneven. For instance, conviction for stealing drugs from the VA can lead to anything from a slap on the wrist or a few months' probation to a five-year prison sentence.

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2.5 - Arkansas Democrat-Gazette: [Service urged at Fayetteville ceremony, Governor, others honor fallen soldiers on Memorial Day at national cemetery](#) (30 May, Dave Perozek, 871k online visitors/mo; Little Rock, AR)

Gov. Asa Hutchinson asked those attending a Memorial Day observance at the Fayetteville National Cemetery to do what they can to keep their country strong.

Hutchinson, the guest speaker at Monday's event, alluded to the idea of a soldier in battle picking up a fallen flag, an action symbolic of what America needs from its citizens, he said.

"In our nation today, we have to ask ourselves as civilians, as Americans, are we willing to see a flag that is falling and to reach out and do what is necessary to pick it up," he said.

America is a world leader, he added.

"We must keep it so to honor those who have given their life so that we might enjoy and appreciate freedom on days like today," Hutchinson said.

Hutchinson noted that 21 Arkansans have been awarded the Medal of Honor, the highest medal for valor in action against an enemy force. He recalled three of those people in particular, all of whom served during World War I.

"We remember those fallen soldiers today and we are grateful for their sacrifice," Hutchinson said. "It is important for us to tell these stories, to say their names, that we may never forget their service and their sacrifice."

This year marks the 150th anniversary of the founding of the Fayetteville National Cemetery, which was placed on the National Register of Historic Places in 1999 and later added to the Civil War Discovery Trail.

The cemetery remains open for burials thanks to the efforts of the Regional National Cemetery Improvement Corp., which was started 33 years ago with the purpose of buying land to expand the cemetery.

The U.S. Department of Veterans Affairs' National Cemetery Administration maintains 135 national cemeteries in the United States and Puerto Rico. Of those, about one-third are closed to burials, and many more are open only for the interment of ashes, said Wesley Stites, a member of the corporation's board of directors.

The original cemetery has almost tripled in size thanks to the efforts of the corporation and the people of Northwest Arkansas, Stites said.

"Most of our money comes from private donations. Over the past 33 years we've donated 30 properties worth nearly a million dollars," he said.

His plea to the audience Monday wasn't for more money, but for more people to volunteer their time to the corporation.

"Look around you," Stites said. "What do you see? You see thousands of lives poured out as service. Give us a little bit of yours. And during this ceremony, please remember those lives that surround you."

Monday's ceremony also featured the Singing Men of Arkansas, a group of about 40 men who sang patriotic tunes, including the anthems of each branch of the military. Also as part of the ceremony, several Northwest Arkansas men took the oath of enlistment into one of the military branches.

Eduardo Vinagre of Bentonville was among those in the audience.

Vinagre, 72, came to the United States as a Cuban refugee when he was 16. He ended up being drafted into the military in 1969 during the Vietnam War, though he never saw action in Vietnam, he said. He did, however, spend 26 years with the Navy, ending his career as a captain.

"The refugee became a captain in the United States Navy," Vinagre said. "And that's the story of America, right? Of the American Dream. Of the American opportunities -- you can call it whatever you want."

Vinagre wore a hat that paid tribute to the USS Elmer Montgomery, a frigate on which he served for about 30 months in the Mediterranean Sea. He said he never misses a Memorial Day ceremony.

"We need to pause for at least one day," he said. "It's not beer and hot dogs day at the pool. It's a day to pause, to think of the real great people who served and had to give it all for the freedoms that we enjoy."

His experience as a refugee makes him deeply appreciate the freedom he has here, he said. He noted other immigrants who have made an impact on the U.S. military, including John Shalikashvili, who was born in Poland and ended up serving as chairman of the U.S. Joint Chiefs of Staff for the Department of Defense.

"The military has a long history of adopting citizens who have adopted the United States," he said.

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2.6 - Tucson News Now: [Veterans still experiencing issues with transportation to VA appointments](#) (30 May, 601k online visitors/mo; Tucson, AZ)

The Southern Arizona VA Health Care Services (SAVAHCS) is working to provide transportation to eligible veterans, after a contract dispute that is happening between the Department of Labor and LMC.

SAVAHCS is providing transportation to veterans by deploying their own drivers, approving overtime pay, and reassigning staff to drive those same veterans to their appointments, until a new contract is in place.

VA officials are also encouraging veterans, who are able, to make their own arrangements for transport to and from medical appointments. Beneficiary Travel reimbursement is available to eligible Veterans who make their own arrangements for transport to and from medical appointments.

SAVAHCS is apologizing for any inconvenience the contract dispute is causing to Beneficiary Travel eligible veterans. They are also working to reschedule any missed appointments due to lack of transportation.

Daily updates will also be provided daily via the SAVAHCS Facebook page - www.facebook.com/VATucson/

Veterans with transportation and reimbursement questions may call the SAVAHCS Beneficiary Travel Office at (520) 792-1450 extension 4626.

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2.7 - El Paso Times (Video): [Commemorating true meaning of Memorial Day](#) (29 May, David Burge, 538k online visitors/mo; El Paso, TX)

Memorial Day is much more than just a day off from work.

That was the message that came through loud and clear at the annual Memorial Day ceremony Monday at the Fort Bliss National Cemetery.

"People forget that it is a day to honor the veterans who have been killed in wars," said El Pasoan and former Army Sgt. James Barnes, who served from 1966-70.

Barnes and his family were among the more than 1,000 people who gathered at the national cemetery to pay their respects to service members who made the ultimate sacrifice for the nation.

Barnes brings his 11-year-old granddaughter, Claudia Salvio, to the ceremony every year.

"It is important for her to learn about the true meaning of Memorial Day and about service members who gave their lives fighting against our nation's enemies," Barnes said.

Salvio, a fifth-grader at Hillside Elementary School, said it is more important to go to ceremonies like this one than to go to barbecues or pool parties on Memorial Day.

"I want to learn about the soldiers who died in our wars," she said.

Attendees were greeted by miniature U.S. flags fluttering in the wind at thousands of gravestones at the sprawling national cemetery. The 1st Armored Division Band played patriotic music, including the always haunting “Last Full Measure of Devotion.”

Other highlights included a salute battery firing off a 21-gun salute and a lone bugler playing a somber rendition of taps.

Maj. Gen. Robert “Pat” White, the commanding general at Fort Bliss and the 1st Armored Division, was one of the featured speakers.

White called on those in attendance to remember the true meaning of Memorial Day with some simple gestures — attending ceremonies like this one, flying their flags at half-staff and pledging to help and support families who have lost loved ones in our nation’s wars.

White recalled how President Ronald Reagan called upon the nation in 1982 to “keep faith” with our service members who fought in all our wars by remembering their sacrifices and keeping their memories alive.

Glenn Powers, the deputy undersecretary for field programs and cemetery operations for the Department of Veterans Affairs, told the crowd that Memorial Day is about remembering those who made the ultimate sacrifice, why they did it and what it means to us personally and as a nation.

“And we need to share it with our youth,” Powers said.

“The price of freedom is reflected in those buried at this cemetery and by the Gold Star families who are in attendance,” he added.

Army Capt. Joel DuBois, the commander of the 1st Armored Division Band, said performing at this ceremony “was the right place to be at the right time.”

“We wouldn’t want to be anywhere else,” said DuBois, from Phoenix. “It is one of the most important days for Army bands.”

Chaplain Maj. Virgil Thomas, the community chaplain for Fort Bliss, said it is easy to take for granted the freedoms we enjoy as Americans.

“There are a lot of military personnel who made the ultimate sacrifice so we may live the way we do,” said Thomas, from Jeffersonville, Ind.

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2.8 - El Paso Times (Video): [Boy and Girl Scouts decorate veterans graves with flags](#) (27 May, Maria Cortes, 538k online visitors/mo; El Paso, TX)

Thirteen-year-old Itzel Garcia, a Girl Scout, took her time placing small American flags in front of graves Saturday at Fort Bliss National Cemetery.

After each placement, she calmly stepped back and saluted. The flags fluttered in the gentle breeze.

"Both my daughter and son are scouts. They wanted to be here because they feel honored to do this," said Jose Garcia, who helped to distribute flags to the scouts. "They wouldn't even allow me to get breakfast this morning in order to be on time."

Itzel was just one of hundreds of scouts, who with troop leaders or parents, got up early to show respect to deceased veterans in honor of Memorial Day on Monday.

Nathaniel Jones, district chair for the Wapaha district of the Yucca Council of Boy Scouts of America, said the tradition of placing flags at national cemeteries goes back many years. He has been helping in El Paso since about 2002.

"Since 1776, there's been at least 1.1 million soldiers, men and women, who have paid the supreme sacrifice, having given their lives to protect and conserve this great nation. And right here at Fort Bliss cemetery, we have interred at the current number to 43,000," he said.

He added that El Paso has a great tradition of decorating the graves and it's important to pass that tradition of service to children.

"If we don't invest in these young people, they are going to miss a great opportunity to appreciate and to serve as many of us have," Jones said.

Steve Shively, who served in the military, said it is a tradition to bring his son, Adam, part of Troop 248 out of Fort Bliss to the cemetery. About 20 boys and three adults from the troop participated.

"We do it to show that our brothers and sisters are never forgotten," he said. "And to show them the respect and gratitude for what they've done for this nation and all the sacrifices that they've done."

Army Spc. Alexander Sewell, who has been in the military for three years, said he was pleasantly surprised by the large number of people who visited the cemetery on Saturday to decorate the graves.

"It's nice to know the community is so vast and willing to be part of such an event," he said.

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2.9 - KOLO (CBS-2, Video): [Security at Reno Veterans Hospital](#) (30 May, Terri Russell, 274k online visitors/mo; Reno, NV)

Back in December of 2013, our local veterans' hospital took a threat by a disgruntled patient very seriously.

The patient called the U.S. Attorney's Office and made comments that were perceived as a potential risk to patients and staff.

"What we've noticed though is this is an individual we've actually had history with in the past," said Darin Farr, with VA Public Affairs at the time.

But events can get more heated and deadly.

Two years ago, in El Paso Texas, a gunman entered the VA Hospital there, and fatally shot a doctors before turning the gun on himself.

"So we are a federal island if you will in the middle of a municipality," says Tim Shaver, Reno VA Hospital Police Chief.

Veterans Hospitals around the country and here in Reno, have their own police force to handle emergency situations, as well has prevent incidents from getting out of control.

They even have their own station here with all the equipment you would expect.

Officers here carry guns, they have bullet proof vests.

There is even a holding cell, which is not used frequently, but when circumstances arise.

If a major incident occurs, charges will be filed on the federal level with the U.S. Attorney.

The challenge they face, keeping the facility secure but also open to patients who come here for care.

But there is another line of defense.

Staff is trained to notice activity and personal interaction that don't seem right.

"The classes are pretty robust in regard to showing employees and teaching them how to detect early signs of aggressive behavior, how to respond and de-escalate when necessary. And how to recognize signs and then things are getting to the point where they need additional help," says Robert Smith, VA Privacy Officer.

Smith says a vast majority of patients are compliant and pose no risk.

However, those patients who become overly upset at the policies here, or can't get the amount of opioids they want can get out of line.

All threats are taken seriously until proven otherwise, and help is never far away.

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2.10 - KNWA (NBC-51, Video): [Memorial Day Celebration at Fayetteville National Cemetery, Ceremony at Fayetteville National Cemetery for Memorial Day](#) (29 May, Dana Winter, 189k online visitors/mo; Fayetteville, AR)

A ceremony at Fayetteville National Cemetery in honor of Memorial Day remembered our nation's past while looking toward its future.

Governor Asa Hutchinson says, "Even if you're relaxing as most people do today, just a time of silence and reflection upon those who have given their life for our freedom is important."

Taking time to remember American heroes this Memorial Day, Fayetteville National Cemetery hosted its annual celebration - bringing out large crowds. Governor Hutchinson says, "We're one of those states that we really contribute to the military. Our men and women volunteer, they serve, and so we're one of those states that has a patriotic vein running through it."

While Memorial Day is a day to remember our country's past - some made promises to serve its future. Recruit Brady Dugger says, "It's just something I've wanted to do since I was a kid." Dugger is just one of the recruits who chose to enlist in honor of Memorial Day. He says, "I'll remember it for forever because it's when I took my oath of enlistment, but it's such a great honor to be here and to take the oath of enlistment in front of all these military personnel and veterans." Dugger hopes his service inspires his peers to get more involved in holidays like Memorial Day. He says, "Some kids just say it's another day off school, but if I can be a help and let people know what it really means by serving, then that's better off for me and for them."

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2.11 - The Herald-Mail: [VA employee recounts son's combat death during ceremony](#) (30 May, Richard Belisle, 158k online visitors/mo; Hagerstown, MD)

MARTINSBURG, W.Va. — When three members of the U.S. Army came to Thomas L. Wilson's door, he politely asked them to leave.

He knew they came to tell him that his son, Pfc. Thomas R. Wilson, had been killed in action in Afghanistan.

His son was with the 1st Battalion 503rd Infantry Regiment, 173rd Airborne Brigade Combat Team in Afghanistan.

"They were in a firefight," said Terry Stotler, director of volunteer services at the Martinsburg Veterans Affairs Medical Center, which hosted its annual Memorial Day service Tuesday morning.

Wilson was firing a .50-caliber machine gun, shooting and killing enemy soldiers, when the vehicle in which he was riding was ambushed by a rocket-propelled grenade, Stotler said.

"He was shot in the head by a sniper," Stotler said.

Wilson was awarded a Bronze Star posthumously.

Stotler said the hospital's Memorial Day ceremony features a VA official or other suitable military speaker.

He knew that Thomas L. Wilson is a materials handler and motor-vehicle operator at the medical center, so Stotler asked him to speak Tuesday.

"I knew his son was killed in Afghanistan," Stotler said. "I asked him if he would speak at our service as a Gold Star father."

Parents of children killed in action are recognized as Gold Star parents, Stotler said.

"Every one of us knows of someone who has fought for our freedom," said Timothy J. Cooke, director of the medical center. "Some gave their last full measure of devotion for our freedom. They must never be forgotten."

Thomas L. Wilson grew up in Luray, Va. He enlisted in the U.S. Army when he was 18, served two years on active duty, then served two more in the Virginia National Guard.

He worked for several police departments, including in Baltimore and Luray, Va. He ended his career as chief of the Strasburg (Va.) Police Department.

Stotler said listening to Wilson's poignant telling of his son's story reminded him of what Memorial Day is really about.

"It's a very solemn day," he said.

A wreath-laying ceremony was conducted by AMVETS Ladies Auxiliary Post 38, and Cmdr. Michael Keller of Veterans of Foreign Wars Post 896 played taps.

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2.12 - WROC (CBS-8, Video): [VA to establish veterans cemetery in Pembroke, Construction will begin this summer.](#) (29 May, Abbey Noble, 150k online visitors/mo; Rochester, NY)

The Department of Veterans affairs is set to establish a national cemetery in the town of Pembroke.

The cemetery will be for all veterans in the Western New York area, which includes Rochester and part of the Finger Lakes.

The VA purchased the 132 acre location two years ago. The first burial will be held a year to a year and a half after construction begins, which is expected to happen this summer.

There are currently five national cemeteries in New York.

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2.13 - Task & Purpose: [Drug Thefts At VA Hospitals Rise Twice As Fast As At Private Facilities](#) (30 May, James Clark, 102k online visitors/mo; New York, NY)

Despite efforts to curtail the theft of opioids and other drugs by employees at Department of Veterans Affairs hospitals, “the rate of reported missing drugs at VA health facilities was more than double that of the private sector,” according to an Associated Press exclusive.

“This is why the VA needs stronger inventory checks and balances and employee accountability,” Joe Davis, a spokesman for Veterans of Foreign Wars, told Task & Purpose in an email. “We cannot allow patients to receive watered-down medications, and we cannot allow thieves and drug dealers to thrive behind federal employee protections. Breaking the law and endangering others must come with immediate consequences, to include prosecution to the fullest extent of the law.”

Amid a nationwide opioid-addiction crisis, medical facilities everywhere have been crunched by drug thefts. But since last October, investigators have opened 36 new theft cases in VA facilities — bringing the department’s total number of open investigations into pilfered prescriptions to 108, according to data from the Drug Enforcement Agency obtained by the AP through a Freedom of Information Act request. That’s well ahead of the 2016 pace, in which VA reported 2,397 drug losses or thefts.

There are more instances of drug theft in private hospitals — but there are also many more private hospitals than VA centers, meaning the VA’s overall drug-theft rate is actually higher.

That spike may partly be a function of the VA’s tougher oversight of drug losses in recent years, Davis told Task & Purpose.

“The tighter the oversight the more incidents that will be reported, initially, because an apex will be reached,” he said. “Whether it’s a fair comparison is debatable, because the VA is required to report whereas the private sector isn’t, unless law enforcement is called in, and then you might only get a snapshot instead of the full picture because the private sector can just fire you instead of risking the embarrassment of public knowledge.”

Following a Feb. 20 report by the Associated Press on the theft of prescription drugs, the VA announced new measures to curtail theft of prescription drugs, including employee drug tests, inspections, and reviews of data in order to identify problems, but “criminal investigators said it was hard to say whether new safeguards are helping,” the Associated Press reports.

In the meantime, VA Secretary David Shulkin and allies in Congress are using the stats as evidence that the department needs freer reign to discipline and fire VA employees. Republican Sen. Marco Rubio of Florida told the AP that “the theft and misuse of prescription drugs, including opioids, by some VA employees is a good example of why we need greater accountability at the VA.”

Rubio’s “VA Accountability First Act,” which would weaken union protections for Veterans Affairs employees and has Shulkin’s support, is widely expected to pass a vote in Congress early next month.

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2.14 - KULR (NBC-8): [Tester comes to Billings for Veteran Listening Session](#) (30 May, Amy Leet, 73k online visitors/mo; Billings, MT)

Senator Jon Tester makes his way to Billings this week for a special listening session to speak with veterans. Tester held the listening session to determine the future of the VA Choice Program.

Tester said he is working to improve the department of Veteran Affairs Choice Program by meeting with veterans, advocates and health care providers.

"What we heard here today were veterans who were continually frustrated with scheduling problems with not being able to let the doctors do their job, with not really decentralizing the VA like what used to happen," Tester said.

Tester heard from Billings veterans who are asking for a change in the way the VA Choice Program is run. Many of them said they have to wait weeks to see a doctor, if not longer.

"I've been declared dead by the people in Ft. Harrison," Veteran Jacqueline Ziegler said. "Which was really amusing. Literally, I was told I couldn't be seen because they thought I was dead because my records were in the basement."

On top of veterans having issues, Tester also said he's heard from providers who say the VA is not paying them on time.

"We've just got to figure out a way to simplify this whole program to make it work better for our veterans," Tester said. "And make it so the providers want to be a part of the program instead of walking away from it."

The goal of the listening session is to hear some of the issues veterans have been having to try to iron them out.

"Everybody is different, every region is different," Ziegler said. "One blanket model does not work for everybody."

"What we've come up with at the Veteran's Affairs committee in the senate is a bill that works for Veterans," Tester said. "And works for providers. We've got to do things that's going to cut red tape and make it user friendly."

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2.15 - Muskogee Phoenix: [Remembering the fallen, Hundreds gather for Memorial Day Program](#) (30 May, Travis Sloat, 63k online visitors/mo; Muskogee, OK)

Sunshine, sweat and solemnity combined in a powerful annual Memorial Day Program at the Fort Gibson Nation Cemetery on Monday.

Hundreds of people gathered under and around the cemetery pavilion to honor those veterans who have died, either in combat or on domestic soil.

William Rhoades, director of Fort Gibson and Fort Sill national cemeteries in Oklahoma, said he was encouraged to see so many come to the event.

"Every year at 2 p.m. on Memorial Day, we have a service to honor those who have made the ultimate sacrifice," Rhoades said. "We have a little over 20,000 grave sites here, and as I tell everyone, burial in a national cemetery is not free. In fact, it's one of the most expensive burials in the world. All of our veterans have paid a price in order to be here."

The crowd participated in a moment of silence to begin the ceremony, and former State Rep. Jerry McPeak welcomed those in attendance. The Posting of Colors was performed by the Boy Scouts, Pack 638 from Fort Gibson.

Jacob Nichols, a representative from the Veterans Affairs Regional Office spoke of a package he'd received from someone who'd purchased the contents at a garage sale. Enclosed in the package was the oldest military award still given to veterans: the Purple Heart. The medal was then passed around the crowd in order for them to observe and touch it.

The Memorial Day Address was given by Dist. 14 State Rep. George Faught, who said he was honored to present the address.

"This is a great way to spend your holiday weekend," Faught said. "Thank you for being here as we remember our fallen soldiers. We can't forget the sacrifices made by so many for the freedoms that we all enjoy."

"Today we're surrounded by grave markers of those who have given their lives for the cause of freedom," Faught continued. "Strangers and best friends are thrown into these circumstances, and create these bonds that are not easily broken. You learn to lean on each other. You know that regardless of the circumstances, your comrade has your back."

The Muskogee Community Band provided the introductory soundtrack to those winding their way through the cemetery, and they also played a patriotic medley just before the Placing of the Wreaths by the Gold Star Families and Blue Star Mothers.

Kerry and Penny Bryant, who traveled from Coweta to participate in the event, said they were proud to be a part of such a large community ceremony.

"I'm a veteran," Kerry Bryant said, "I just want to come out here and honor these guys who gave their lives in the service. It's an honor to come out here and see fellow veterans and all those who have been there before."

"We're glad to see the younger children here," Penny Bryant said. "The younger families who bring their children."

Rhoades said he was proud to be from the Midwest, where there is "a huge sense of patriotism."

"I'm a Midwestern boy," he said. "I was born and raised in Illinois. I tell everyone I wasn't born an Okie, but I intend to die one. This ceremony is important because the community is involved. The veterans see that there are people who care about them, and that their legacy will go into perpetuity."

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2.16 - WETM (NBC-18, Video): [Memorial Day Ceremony at Bath Nat'l Cemetery](#) (29 May, Michelle Ross, 59k online visitors/mo; Elmira, NY)

BATH, N.Y. (18 NEWS) - While many Americans are enjoying their day off with a barbecue or out on the lake, veterans are hoping they take a moment to realize what this day is about.

Across the country, fallen soldiers are being remembered for their service this Memorial Day.

For the Bath VA Medical Center, every day is a day of remembrance for those who served and continue to serve this country.

The local community had the chance to join in on Monday's particular observation by gathering on campus at the Bath National Cemetery in the middle of 15,000 markers.

In front of those markers stood 15,000 American flags placed by the Dana Lyons 5th grade classes to help commemorate and honor our fallen soldiers.

"When the community comes out and supports us in honoring the veterans, it's a great day," Medical Center Director Michael Swartz said.

This Memorial Day, it was Assemblyman Phil Palmesano's first time speaking at this ceremony.

"It's very humbling, and it really overcomes you with emotion and gratitude when you see 15,000 grave markers out here for heroes that I'll never know, or many of us will never know, but they paid the ultimate sacrifice," Palmesano said.

The Presentation of Colors was conducted by the Steuben County Sheriff's Office.

A wreath was also placed on the 40-foot high Preservation of the Union Monument.

For one Vietnam War Veteran, there's no reason to hide emotions this day.

"To me, it's just a day to look around at the graves much the same as at the dedication of the Vietnam Veterans Memorial when they took us to go for a tour of Arlington which is quite overwhelming," Terry Nardone said. "It's a day to remember and to cry a little."

Assemblyman Palmesano says one way to show your respect is to offer your help to a veteran whether that's mowing their lawn or helping them out with a project.

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2.17 - Salem News: [Poplar Bluff VA reports on Veterans Affairs Day outcomes](#) (30 May, Andrew Sheeley, 12k online visitors/mo; Salem, MO)

The John J. Pershing VA Medical Center in Poplar Bluff has released information on the positive outcomes generated by this year's annual Veterans Affairs Day held at the Salem American Legion/VFW Hall April 28. The figures indicate more than a dozen VA staffers and

representatives from other VA service organization helped scores of local veterans receive direct in person guidance and assistance.

According to the VA's figures, officials provided information and assistance to 25 veterans and veteran families covering: Camp Lejeune disability benefits, survivor benefits, adding dependents to an established benefits award and eligibility for entitlement to individual unemployability.

A total of 13 veterans were enrolled into the VA's healthcare system.

Seven veterans' issues were also taken for follow-up review and contact, with all follow-ups having been completed with by May 5.

Other individual positive outcomes included:

- One veteran was assisted in getting in-home care.
- One veteran, who couldn't drive long distances, was helped in getting a VA Choice appointment scheduled in Salem.
- One veteran was assisted with applying for her GI Bill benefits.
- One veteran was helped with applying for VR&E-Chapter 31 educational benefits.
- One veteran is now working with the education division on an increase in his education payments.
- The VA provided status updates on multiple veterans' pending claims and appeals - eliminating need to visit the regional office or call the 1-800-827-1000 number.
- One veteran's intent to file a claim was documented, thereby protecting the veteran's claim date.

Staffers from the Poplar Bluff VA Medical Center, and representatives from many other veteran service organizations, attended Salem's Veterans' Affairs Day. VA officials attending included enrollment and claims processing specialists, as well as workers with Poplar Bluff's Business Office and My Healthy Vet program. The Columbia VA Medical Center also had two counselors onsite with the Vet Center Mobile Van.

The Missouri Veteran Commission brought service officers. Representatives from organizations that providing aid to homeless veterans and those who need help with living expenses were present. Representatives from elected federal officeholders including Eighth District Representative Jason Smith and US Senators Claire McCaskill and Roy Blunt were also on hand.

Veteran Affairs Day is open to all veterans of Missouri 16th American Legion district, which includes Crawford, Dent, Howell, Laclede, Maries, Phelps, Pulaski, Shannon, Texas and Wright counties.

LaBrash says planning is already underway for the fourth Veterans' Affairs Day, which will be held in the spring of 2018.

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3. Access to Healthcare

3.1 - Courier-Journal: [Closing outpatient VA centers fail veterans | Angela Leet](#) (30 May, Angela Leet, 2.1M online visitors/mo; Louisville, KY)

Each year, Memorial Day serves as a reminder that there is a cost to freedom. The brave men and women in our U.S. military and their families have given of themselves to protect this great nation and they have earned our admiration and our respect. It's because of this that we must continue to stand with our veterans and advocate alongside them to demand the very best our nation can offer in health care.

New hospital projects that are significantly past due and 300 percent over budget sadly define Veterans Affairs hospitals across America. The VA is facing nearly \$2 billion in cost overruns at four different VA hospital projects, including one in Aurora, Colorado. But it's been made clear, despite legitimate concerns, the VA is moving forward with the property located along the Watterson Expressway and Brownsboro Road.

In their final Environmental Impact Statement, the VA stated that the Midlands property remains their preferred alternative for a new Louisville VA Medical Center. What is most concerning is that with this preferred alternative the VA will close the only three community-based VA Healthcare Centers at Dupont, Shively and Newburg as well as the downtown VA Regional Benefit Office.

The relocation of the VA hospital and closure of the outpatient clinics should take into account the needs of all veterans with a specific emphasis on those who are most likely to need and use their veteran benefits as their primary source of health care. According to census data the 40210 ZIP code, which is located in Shively, has the second lowest average income in all of Metro Louisville at \$29,110 and is almost as far as you can get from the proposed site. So far, in fact, that if a veteran living in Shively needed to rely on public transit to get to the VA's preferred alternative, it would take him or her nearly 2 hours on the bus to get to their appointment. This is unacceptable. Closing the Dupont, Shively and Newburg VA clinics has the potential to be a significant health detriment for some of this community's most disadvantaged veterans from having access to their health care.

As a community, we should never endorse a model of care that takes access away from those who need it the most. According to the American Hospital Association, more and more patient interactions are being done on the outpatient side. We have seen this in our community over the last several years with many local hospitals building outpatient clinics to extend their health care reach throughout the community. So why then does it appear that the VA is more supportive of reducing the overall number of beds at a new facility, closing outpatient clinics and relocating the benefit office to one smaller campus?

The VA has made their preference for a new hospital location clear, but I remain unconvinced that a \$1 billion investment in bricks and mortar is the answer. Some of this money would be better utilized providing actual care to veterans because our veterans should have easy, uncomplicated access to their health care.

Angela Leet is the representative for Louisville Metro Council's District 7.

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3.2 - AZ Family (Video): [Phoenix VA Director speaks about new improvements](#) (29 May, 1.1M online visitors/mo; Phoenix, AZ)

She is the seventh director in less than three years at the Phoenix Veterans Affairs health system, brought in last October to lead the most scandal-plagued facility in the nation.

VA Director RimaAnn Nelson spoke to Good Morning Arizona Monday morning about what improvements and what progress is being made under her leadership to turn around the troubled department.

The Phoenix VA kicked off the infamous wait list scandal of 2014 that resulted in a nationwide audit.

Nelson said there had been improvements in the VA system since the scandal.

"It's gotten a lot better," she said. "We made great strides in improving access to veteran's care and wait times."

Nelson did admit that they have more work to do.

But Nelson stated the VA system opened two new clinics in the Phoenix area, and 900 employees were hired to their system.

"Proud to say that 37 percent of our employees are veterans themselves," she said. "But as more veterans enroll in our system, we need to continue to add more so we can stay ahead of the growth and maintain the access."

During her tenure in St. Louis, Nelson was criticized for her track record and a low satisfactory rate from patients.

"I made some difficult decisions in St. Louis," Nelson said. "When things were not going right, I closed things down."

The director stated she was told by VA officials that she got the position because she made difficult decisions.

Nelson said she would continue to make difficult decisions and do whatever it takes to get things right for Valley veterans.

She added that she is open to hearing feedback from the employees.

As for the veterans needing care, Nelson assures they will look forward to the improvements.

"We are here to serve them but also to thank them too."

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3.3 - KNXV (ABC-15, Video): [What's new at the Phoenix VA?](#) (29 May, 2.1M online visitors/mo; Phoenix, AZ)

What's new with the Phoenix VA Health Care System?

ABC15 Mornings anchor Dan Spindle-ABC15 talked with the new director this morning and answered some of your questions about the VA, following local scandals.

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3.4 - WSFA (NBC-12, Video): [Central Alabama VA director talks wait times, eyes ongoing improvements](#) (30 May, Lindsey Rogers, 439k online visitors/mo; Montgomery, AL)

From appointment wait times to provider shortages and trust issues, the woman at the helm of all the Veterans Affairs healthcare facilities throughout Central Alabama is addressing the changes being made throughout the system.

Dr. Linda Boyle granted her first exclusive sit-down interview for an in-depth look at the Central Alabama Veterans Health Care System (CAVHCS).

Boyle spent 20 years in Alaska before moving to the Deep South. She served as the Associate Director for Patient Care Services at the Alaska VA Healthcare System (CAVHCS) and later was appointed interim director. She believes it was God's calling for her to come to Central Alabama.

"I love it down here. I love the people here and I love my job and I love the mission that I have. I think probably the reason I love it so much is because I'm a veteran, my husband is a veteran and to get the opportunity to lead an organization to take care of our veterans is just fantastic," she said.

Before her VA service, Boyle was the Medical Group Commander at the Patrick Air Force Base in Florida. A retired colonel of the United States Air Force, Boyle served on active duty for approximately 24 years as well as five years with the Air National Guard of Pennsylvania. She held a variety of healthcare leadership positions in her military career, including Clinical Specialist and Medical Support Squadron Commander.

As director of CAVHCS, Boyle oversees division campuses in Montgomery and Tuskegee and clinics in Dothan, Montgomery, Monroe, and Wiregrass in Alabama as well as Columbus and Ft. Benning in Georgia. The facilities provide healthcare to more than 48,000 veterans with a workforce of over 1,600 employees. CAVHCS is a 330-bed facility with an operating budget of approximately \$280 million.

Boyle says she sees challenges at CAVHCS to be opportunities for improvement.

"I find that the majority of my staff are wonderful people. They're hard working. I see processes that perhaps don't work as well as they should. We have long discussions on rules versus principles and doing things by principle, versus looking always at what the rule book says. Not that I'm breaking laws, but I think it's an opportunity to look at things differently," she explained.

For her, communication with staff members and veterans is key. She's held several town halls and intends to host more in the future. She's reached out to Veterans Service Organizations and visited with lawmakers.

She feels that having permanent leadership in place will allow improvements to continue. Interim directors have been in place since 2014 when then-director James Talton was fired. At the time, his termination was the first the VA made under a law that helps speed up the process of demoting or removing top VA executives for poor performance or misconduct.

"When you keep changing out leadership, it's very hard for people to know how to follow or what they should be doing. The other thing that I bring with me is that whole idea of servant leadership because I truly believe the leader is on the bottom and the staff and the veterans are on the top," Boyle stated.

CAVHCS had some of the longest appointment wait times in the country and was part of a national scandal employees were caught putting veteran's names on paper wait lists so that the computer system wouldn't show how long they were really waiting for care.

In 2014, the system has an average appointment wait time for new patients of 75 days. That was the seventh-worst nationally. The average wait time for first-time mental health patients was sixth-worst at 57 days.

In 2017, the latest data shows that the average wait time across CAVHCS for primary care new patients is 30 days, first time mental health patients is 15 days and specialty care new patients is 15 days - wait times cut by 60-75 percent over three years.

Ninety percent of CAVHCS appointments are scheduled in 30 days or under.

"My wait times are not where I want them to be," Boyle said. "They have gone down somewhat but then they went back up again when we were looking at the loss of providers. The one thing I feel good about is that I believe the wait times are accurate. And that had been a difference in the past when there had been some issues with scheduling. My wait times are accurate."

Boyle says same-day services are now being offered at all CAVHCS facilities and a new out-patient clinic on Chantilly Parkway is helping get veterans care faster.

The VA's provider shortage has impacted the clinic but Boyle announced that a new doctor has been hired, as well as two nurse practitioners. Another physician, a fourth doctor for the clinic, is coming on board in August.

"We still have other positions that we need to fill and we continue to recruit for those," she added.

Boyle thinks her idea of "whole health" will also help move CAVHCS forward.

"What's important about that it's not what is the matter with me, it's what matters to me. If your provider doesn't take the time to find out what matters to you, that we, as healthcare providers, can't assist you with whatever's wrong with you," she explained.

She wants CAVHCS to be the best of the best and believes the system is a five-star program in the making.

"I believe everybody on staff is going to help to make that happen and our veterans are going to be excited to be here, to actually choose VA for their care when they have other opportunities available to them," Boyle added.

She's been working to build trust with the staff through monthly communication updates she sends out. Employees write back to her with comments. She also did an all-employee survey. She made it mandatory that all supervisors talk about the survey results with their staff.

"If an employee takes the time to fill out a survey, then someone should take the time to read it and see what changes need to be made to make a difference. I believe that if your employees are engaged, veterans will be happier when they come to be cared for here," Boyle said.

She believes there's less fear in the organization now from when she took over.

"There still is some fear with staff. I have pushed for accountability. I've looked at ways to hold people accountable. I've pushed for ownership. We're also looking at re-education of staff on every level," she added.

There's not been staffing changes yet at CAVHCS, Boyle revealed. The associate director has been turned into a deputy director role. The deputy director stays in Tuskegee and Dr. Boyle stays in Montgomery to provide leadership at both campuses. Boyle has looked at several administrative boards, but has not received the results yet.

When asked what needs to happen to continue to move CAVHCS forward, Boyle stressed that it's simple things the staff can do.

"One issue that veterans have brought up to me is just that we don't seem to smile enough. I sent out a couple messages to staff about smiling. I got several responses back from people saying they're on board and to count them in," she said.

She reviews each note left for her and meets with veterans who come to her office, believing in an open-door policy and ongoing dialogue.

"I recognize that trust is something that one has to win back. I very much so want veterans trust us again if they don't currently and I want to maintain that trust if they do," she said. "It's all about relationships."

The Tuskegee and Montgomery campuses just won an Emerald Award for leading the health care industry in sustainability and environmental stewardship. These two awards were among only 32 Emerald Awards given to VA hospitals nationwide this year.

CAVHCS has also launched several initiatives to help homeless veterans. An initiative that's a collaborative effort between CAVHCS, Family Endeavors and other River Region agencies and

entities started last year to provide assistance to homeless veterans that are seeking permanent housing or at risk of becoming homeless.

A housing fair last year help more than 10 veterans get housing the same day of the event. A bell was rung and every time a veteran signed his leased and received his keys.

Bikes for homeless veterans and those looking for jobs were recently donated to a number of local shelters.

Boyle also discussed a renovation of the emergency room at the Montgomery VA hospital on Perry Hill Road that nearing completion.

It will include brand new monitoring system and overhauled rooms.

It increases the size from 3000 sq. ft. to 9000 sq. ft. and will add 25 beds, which includes beds for Mental Health and Women's Health. The renovation is currently scheduled to be completed in August.

"I think CAVHCS is on the move. I believe we're on the move," Boyle said.

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3.5 - WXIX (FOX-19, Video): [Father raises awareness of veteran suicide after death of his son](#) (30 May, 437k online visitors/mo; Cincinnati, OH)

Hundreds of American flags have been placed across the Tri-State in the past few months.

On Memorial Day, more than 600 flags waved at Tower Park.

But there's an important message behind the patriotic displays.

"Families, the empty chairs at tables," said Howard Berry. "The grieving process and the questions, the unanswered questions."

Howard Berry started the Flags for Forgotten Soldiers campaign after the death of his son, US Army Staff Sergeant Joshua Berry.

Joshua had just returned to the US from a tour in Afghanistan in 2009 when shots were fired at him during the attack at Fort Hood, Texas. He was then diagnosed with post traumatic stress disorder.

"He was treated here at this Cincinnati VA and committed suicide in February 2013," said Howard.

Since then, Howard has been on a mission, erecting groups of flags wherever they will let him.

660 star spangled banners, to be exact.

"Each one of those flags represents a man or a woman that died by their own hand," said Berry.

A US Department of Veterans Affairs study in 2016 estimated that 22 veterans or soldiers kill themselves every day. That's 660 deaths in a 30 day month.

Josh Berry was one of them, but his dad says this isn't just about his son.

"It breaks my heart, it really does," said Howard. "To realize that over 7,000 are completing suicide every year and we've got to do a better job."

Howard says his goal by the end of the year is to have at least one Flags for Forgotten Soldiers display in every state.

He also wants someone to hold the VA and their treatment programs accountable, and better job opportunities available for those who are diagnosed with PTSD.

"These folks just fall through the cracks and I honestly believe that veterans should be the core of our community," said Howard. "They volunteered to defend our freedom and we're leaving these men and women behind."

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3.6 - Bulletin: [Murphy says law would ensure discharged veterans receive mental health care](#) (30 May, Ryan Blessing, 271k online visitors/mo; Norwich, CT)

Veterans in Eastern Connecticut say it's difficult for them to get adequate treatment for post-traumatic stress disorder, traumatic brain injuries and other service-related mental health issues.

The veterans met Friday at Otis Library in Norwich with U.S. Sen. Chris Murphy, D-Conn., who offered an update on efforts in Congress to aid former service members and to get feedback from them on the challenges they face.

A new U.S. Government Accountability Office report shows 62 percent of service members dismissed from the U.S. military between 2011 and 2015 had diagnosed mental health disorders related to their service.

"The numbers aren't getting any better. We're still losing a veteran every hour to suicide," Murphy said. "Of those vets who take their own lives every day, only six or seven of them are hooked up to VA care. This is not just about the system itself, but also about making sure we get folks into the system."

Murphy is calling for passage of the Honor Our Commitment Act of 2017, which, he said, would ensure discharged veterans with mental illnesses continue to receive the care they need from the Department of Veterans Affairs.

Specifically, Murphy said there's a problem with veterans that get less than honorable discharges due to misconduct related to their PTSD or brain injury.

"You lose your access to the VA or maybe to GI benefits. But it's basically the worst of all worlds, because you have such a serious disability that you acted out in some way ... and then you get cut off from the very system you need in order to recover," he said.

The wrongful discharge of service members with mental health disorders ultimately bars those members from receiving much-needed health care, housing and employment benefits, Murphy said. It may also discourage other service members from seeking medical treatment, he said.

Veteran and active reserves battalion commander Ryan Thompson, of Norwich, said soldiers need some assurance that seeking treatment for their medical condition would not be used as a basis for a discharge.

"If something is determined to be a medical condition, they would be either protected and still able to serve, or medically retired and still able to receive benefits," he said.

Claude Campbell, a 31-year veteran and the military and veterans affairs liaison for Murphy's office, concurred.

"It is a stigma and a belief that if something goes wrong, then you automatically get kicked out," he said. "Like with PTSD. Service members sometimes get in trouble because they can't control their emotions at the time, from PTSD, and then they end up getting discharged and lose all their benefits."

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3.7 - KTVQ (CBS-2, Video): [Sen. Tester talks with veterans about improving VA Choice](#) (30 May, Samantha Harrelson, 197k online visitors/mo; Billings, MT)

U.S. Senator Jon Tester began a tour of Montana, talking to veterans and providers about healthcare.

On Tuesday morning, Tester listened and asked questions of veterans in attendance who were voicing their concerns with the current VA Choice Program.

Tester, an advocate for veterans in the Senate, said the program needs to be reworked; both for the benefit of veterans and for healthcare providers.

The senator said the path forward may include different options for different demographics, citing the unique challenges that Montana Veterans face.

"We may end up with a choice program that actually has different components for rural America than it does for urban America and that's okay as long as it's well thought out and as long as it reduces red tape," said Tester. "I think our biggest challenge here in Montana, and you know Montana is a special place anyway, but just the fact that we are so very rural and we have so many veterans – we are second highest per capital in the number of veterans - poses some challenges that other places may not have."

Tester will host another listening session in Missoula on Wednesday.

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3.8 - KXLY (ABC-4, Video): [Photography for Veterans therapy](#) (29 May, 196k online visitors/mo; Spokane, WA)

When soldiers came home from the Vietnam War, they had very little waiting for them in terms of therapy to deal with memories of combat. One Vietnam veteran, Christopher Chaffee, didn't want today's generation of veterans to go through that, so he decided to do something about it.

Two years ago Chaffee had just retired. He purchased a camper and had plans to see America, but something held him back.

"It seems the camera has grabbed me by the neck straps and dragged me right back out the door and said we are not done yet," Chaffee shared.

The idea of forming a camera club for veterans came about.

"I started talking with doctors and psychiatrists out at the VA Medical Center about the possibility of a creative endeavor and the alternative therapeutic value of that," he explained.

Together they created a step by step program for veterans dealing with depression and post traumatic stress with class starting at the Veterans Outreach Center.

He added, "there's a safe-zone that they feel there. They are in the classroom with other vets that are suffering from the same things that they are going through so they have a camaraderie that goes there."

Out in the field, Chaffee says carrying cameras mirrors the sense of protection veterans had carrying weapons in combat; in a sense reprogramming the brain as they are not destructive.

"We avoid terms such as shooting people. We talk about photographing subjects when it comes to portraiture," Chaffee shares.

The program has received great feedback from the counselors and students themselves. Andrea Hesler served in the military for ten years. Her last tour in Iraq was the hardest.

Hesler explained, "within my unit we lost 6 people. Within the battalion we lost 39."

She had a hard time making friends as people couldn't relate to what she had been through.

"I just feel comfortable with the people here. It's been a wonderful experience," she added.

Veteran Noel Pierce shared that in the ten years since he returned from active duty. He became a recluse. LightBenders was what got him out of the house and doing things he couldn't do before; like taking the bus as well as the Torchlight Parade. It was a big deal for him as he has struggled with crowds.

He shared, "It's given me a passion that I am actually going to pursue for the rest of my life."

The LightBenders program is the first of its kind in the United States.

Chaffee, who calls the students his heroes hopes to expand it, having at least one LightBenders program in each state.

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3.9 - Joplin Globe: [New veterans clinic to open in Joplin in late 2018](#) (30 May, Emily Younker, 78k online visitors/mo; Joplin, MO)

The announcement on Monday that a new veterans outpatient clinic will be placed in Joplin was heralded as "a long time coming" by one veterans advocate.

"We've been fighting to get a clinic here for many years, and I'm excited that it's finally going to happen," said state Rep. Charlie Davis, R-Webb City and chairman of the House Veterans Committee. "I think, all in all, our veterans are going to be much better served with a facility here."

The new clinic, to be located at 3015 S. Connecticut Ave. in Joplin, will operate in conjunction with a Springfield clinic that is currently under construction, the U.S. Department of Veterans Affairs said on Monday. It is projected to open in late 2018.

"We are thrilled to be expanding our services to the veterans in Joplin and surrounding areas," said Bryan Matthews, director of the Veterans Health Care System of the Ozarks, in a statement.

The clinic will be 20,585 square feet and will provide primary care, mental health and laboratory services. VA officials said the Joplin and Springfield clinics combined will give thousands of Southwest Missouri veterans access to health care that is within a 30-minute drive.

Wanda Shull, public affairs officer, said the clinic could serve about 7,000 veterans in the Joplin area.

"It really just drives home, I think, why Joplin is such a good area for the clinic," she said.

VA officials in February 2016 said that they would open a new clinic at 1800 W. Republic Road in Springfield to replace the Gene Taylor Outpatient Clinic in Mount Vernon, which opened in 1989. They said at the time that they were hopeful to also open a clinic in Joplin, but they hadn't yet found a site for it.

The Joplin clinic will be located in a cluster of medical office and professional buildings at 3015 S. Connecticut Ave. and 2011 E. 32nd St. The buildings were constructed several years ago for \$4.5 million, the Globe previously reported, and have largely been vacant since.

"The site met the criteria that the VA has established for a community-based outpatient clinic," Shull said. "It also has a great location (in proximity to) restaurants, public transportation, shopping and other medical facilities."

RKS Development LLC, which was involved in the construction of the buildings, has been named as the developer for the Joplin clinic. Shull said some remodeling of the interior of the building will be required, and VA officials will "pretty quickly" begin the design phase of the project.

Despite lobbying from Mount Vernon officials to keep their clinic open, it is scheduled to close once the Springfield and Joplin sites are open. Shull said a 2011 analysis by Veterans Affairs found that the highest percentage of veterans in Southwest Missouri were living in the counties surrounding Springfield and Joplin.

"We're locating clinics where the veteran population is, so it's not necessary to have a clinic in Mount Vernon anymore," she said.

Other locations

The Veterans Health Care System of the Ozarks consists of one Veterans Health Administration facility in Fayetteville, Arkansas, as well as outpatient clinics in Fort Smith, Harrison and Ozark in Arkansas; Branson and Mount Vernon in Missouri; and Jay, Oklahoma.

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3.10 - Texas Public Radio (Audio): [How Long Are South Texas Veterans Waiting For Care?](#) (29 May, Wendy Rigby, 73k online visitors/mo; San Antonio, TX)

It's been three years since a national scandal over wait times at VA hospitals. Today at the Audie L. Murphy Memorial VA Hospital in San Antonio, hundreds of veterans are still waiting more than 30 days to see a doctor.

Data collected by National Public Radio and made available to Texas Public Radio tells the story of an increasing need for veterans care and the scramble to keep up.

In the waiting room of the Internal Medicine Clinic at San Antonio's Audie L. Murphy VA Hospital, 74-year-old Darwin Dahl sports his Purple Heart ball cap. He's waiting to meet with his new primary care doctor. Dahl spent 18 months as a machine gunner in Vietnam.

"I got shot one time from the ground," Dahl said, "I got shot in the leg."

He likes the service at the VA and compliments the doctors and nurses, who "knows what they're doing," Dahl said. But, he admits, that the wait for care is sometimes long.

"It's slow because they have so many people to deal with," Dahl remarked.

To help, Congress passed the Veterans Choice Act of 2014. It provides the option for veterans to get appointments with community doctors. That happened more than 30,000 times in South Texas.

Also, the federal government earmarked more than \$2 billion for VA hospitals around the country to hire the staff needed to cut down wait times.

For some patients, that worked. But for others, wait times in San Antonio went up in the last three years. With a big emphasis on hiring psychologists and psychiatrists, patients needing mental health care get it faster than before.

Veterans who need routine mental health appointments wait less than half the time they did two years ago. It used to take almost five days. Now it takes an average of two.

Group Practice Manager Preeti Patel said wait times for primary care appointments have also dropped from 6 days in 2014 to just over 4 days in 2017. However, wait times for specialty care – services like outpatient surgery, urology and endocrinology – went up from 4 days to 7 days.

The reason is a shortage of specialty physicians. Vacancies create a back log. Plus some specialties, like dental care, are not covered by the Choice Act.

Overall, staffing at San Antonio's VA went up 5 percent since 2014. Still, in the two years that followed, each month, an average of 29-hundred patients waited longer than 30 days to be seen. That's 5 percent of all appointments.

Chief of Human Resource Management, Jeffrey Young, says the local VA is working hard to keep up. 500 positions are open right now.

"We have been growing by leaps and bounds over where we were about three or four years ago," Young stated.

Some patients say the VA seems to be trying harder. Like former Air Force electrician Sherry Youngblood, who notes an attitude shift in the medical professionals.

"Honestly, sometimes they didn't have the right demeanor," Youngblood noted. "Now, it's not that way. It doesn't seem like I'm bothering you when I come to get care from you. People are nicer. The quality of care has gone up."

Others, like 76-year-old LeRoy Caverly, are willing to wait a little to see a VA doctor they know and trust.

"I think they're doing the best they can," Caverly said.

The Vietnam Green Beret comments that the VA seems to meet those with the greatest needs first and that's okay with him.

"There are a lot of people here that think they should get in right away," Caverly observed. "And there are people here who've been hurt a lot worse than they are, who need service first."

With younger veterans returning home from recent conflicts, and aging Korean and Vietnam War veterans needing more care, the VA will have to continue to improve access to keep up with the growing demand and avoid long wait times.

The South Texas VA has a commitment to hiring veterans to serve veterans. 43 percent of employees served in the military.

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3.11 - KNOE (CBS-8, Video): [Veterans, family walk to Shreveport in honor of Jonathon Darden](#) (30 May, Gwendolyn Ducre, 65k online visitors/mo; Monroe, LA)

Jonathon Darden was a veteran of the Iraq War and, according to his mother, a Post Traumatic Stress Disorder victim.

His body was found on I-20 near the Well Road exit in West Monroe this month. Darden's body sat alongside the interstate for nearly a week. His mother believes he took his life after battling with PTSD.

"I don't want no more veterans to pass away like this," Carla Barber said.

Local veterans agree. That's why two military support organizations, Heroes Sport and O.U.R home, are starting their first Post Traumatic Stress Journey in honor of Darden. They want to bring awareness to the disorder.

"I would like more support from the VA. Somebody has to get involved and make sure that they aren't just doping up veterans," said Trey Vocker with Hero Sports. "We're not psychiatric patients, we're someone who fought for freedom."

Darden's mother suggests getting a service dog. She says they can help sufferers cope or, in Darden's case, let family know something is wrong.

"It was all working out, but that day he didn't take angel with him, and that's weird," she said.

A service dog, Annabelle, tagged along on the journey. Her owner said he can't leave home without her.

"Dealing with my anxiety, what she'll do is jump up to my chest and start licking me in the face letting me know it's okay," said the owner.

Supporters are walking from Well Road along Hwy-80. They'll end at the Veteran's Affairs Office in Shreveport.

They expect to make it by Wednesday.

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3.12 - Big Island Now: [Sens. Hirono & Crapo Lead Effort to Fund Homeless Veteran Support Programs](#) (30 May, 57k online visitors/mo; Honolulu, HI)

Sens. Mazie Hirono (D-Hawaii) and Mike Crapo (R-Idaho) led a bipartisan group of 28 Senators, urging robust funding for the Supporting Services for Veteran Families (SSVF), Grant and Per Diem (GPD) and Housing and Urban Development-Veterans Affairs Supportive Housing (HUD-VASH) programs for Fiscal Year 2018.

These federal programs provide critical services and housing for veterans and their families experiencing homelessness.

The Senators wrote:

"The SSVF, GPD, and HUD-VASH programs are central to federal efforts to ending veteran homelessness. These unique programs support communities across the nation providing critical services and housing for veterans and their families. As we work towards the goals of ending veteran homelessness, providing sufficient funding to the SSVF, GPD and HUD-VASH programs will allow for continued momentum and progress."

"Homeless prevention and rapid rehousing funding through the VA's SSVF program have been instrumental in supporting the veterans in our state," said U.S.VETS – Barber's Point COO Darryl Vincent. "This fiscal year alone, to date, we have served 362 veteran households and supported 85% in their transition to permanent housing. The effectiveness of this service delivery model is essential to ensuring that we continue to work towards decreasing the number of homeless veterans who are still in need of our assistance. Because of Sen. Hirono's advocacy for this program, and through community partnerships, we are hopeful that this funding will continue to impact the lives of more veterans and their families."

"In partnership with communities across the country, the GPD, SSVF and HUD-VASH programs have resourced community service provider efforts to successfully reduce veteran homelessness by nearly 50% since 2010," said Kathryn Monet, CEO of the National Coalition for Homeless Veterans. "However; there were still nearly 40,000 homeless veterans in 2016, with just over 13,000 of them unsheltered. Work remains to get every last one of them into permanent housing, a feat that would be near impossible without the dedicated support of these programs."

Sens. Hirono, Crapo, Tammy Duckworth (D-Ill.), Christopher S. Murphy (D-Conn.), Maria Cantwell (D-Wash.), Sherrod Brown (D-Ohio), Sheldon Whitehouse (D-R.I.), Tammy Baldwin (D-Wis.), Richard Durbin (D-Ill.), Gary C. Peters (D-Mich.), Al Franken (D-Minn.), Elizabeth Warren (D-Mass.), Christopher A. Coons (D-Del.), Chris Van Hollen (D-Md.), Jack Reed (D-R.I.), James E. Risch (R-Idaho), Dean Heller (R-Nev.), Jeff Merkley (D-Ore.), Robert Menendez (D-N.J.), Kirsten Gillibrand (D-N.Y.), Amy Klobuchar (D-Minn.), Martin Heinrich (D-N.M.), Cory Booker (D-N.J.), Margaret Hassan (D-N.H.), Edward Markey (D-Mass.), Bernard Sanders (I-Vt.), Thom Tillis (R-N.C.), Mark Warner (D-Va.), Catherine Cortez Masto (D-Nev.), and John Cornyn (R-Texas) urged the Senate Appropriations Subcommittee on Military Construction, Veterans Affairs and Related Agencies to continue strong funding for the SSVF, GPD and HUD-VASH programs.

According to the U.S. Department of Housing and Urban Development (HUD), since 2009, the number of homeless veterans has been reduced by about 50%. However, according to HUD's most recent Point-in-Time Count, there are currently 40,000 veterans experiencing homelessness nationwide on any given night, many of whom could benefit from services provided by these programs. Although progress has been made, having even a single veteran experiencing homelessness is one too many.

Last year, Sen. Hirono successfully passed legislation that reauthorized these programs to ensure that veterans could continue to receive uninterrupted services.

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3.13 - KODE (ABC-12, Video): [New V.A. clinic coming to Joplin](#) (30 May, Leisha Beard, 54k online visitors/mo; Joplin, MO)

The clinic will be located at 3015 South Connecticut Avenue.

The new clinic will be in conjunction with the clinic being built in Springfield. Together they will serve the Southwest region of Missouri.

By locating clinics in Joplin and Springfield, this allows the va to expand access within a 30-minute drive time to approximately 9,000 veterans.

The Gene Taylor Outpatient Clinic in Mt. Vernon will close after the Springfield and Joplin clinics are open.

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3.14 - BeyondChron: [VHA Must Not Outsource To Lenscrafters](#) (30 May, Suzanne Gordon, 38k online visitors/mo; San Francisco, CA)

"We make eyeglasses for our veterans. Last time I checked, every shopping mall in America has a place where you can get glasses in an hour. I don't care about making eyeglasses. I care about getting that veteran his prostheses."

As a 71- year-old civilian and non-veteran, I don't rely on my local veterans hospital for help with an artificial limb. But, like many, VHA patients of my generation or younger, I do need vision and hearing care. So when Trump Cabinet Secretary David Shulkin suggested recently that ' There's A LensCrafters On Every Corner that could just as effectively deliver optometry services, and that the VHA should eliminate its audiology services, ' I was well positioned to become a secret shopper who could market test this out-sourcing possibility.

So the other day, when I needed to update a backup pair of glasses with a new prescription, I didn't head down to my local optometrist but instead decided to try LensCrafters. I would get, I thought, quicker service, pay far less, and have a much better customer experience.

Turns out that there isn't a LensCrafters on "every corner" in my Richmond, California neighborhood. There isn't a single one. The closest one is located across the Richmond San Rafael bridge in an upscale shopping mall in Marin County. I called to make sure I didn't need an appointment and was assured that there would be no problem, no waits, just come on in.

With my optometrist's prescription in hand, I headed their way. Although the LensCrafters in Corte Madera is sleekly decorated, the first thing I noticed was the store's shortage of staff. One technician was trying to juggle answering the phone as well as waiting on two customers. The woman he was serving was irate because the store had screwed up an order. The technician disappeared to try to figure out what had gone wrong.

I strolled around the shop, sure that someone else would emerge from the back of the store. Someone did, but he began to serve the customer ahead of me. I sat down and waited. The technician finally came back, explaining patiently to his frustrated customer that he simply couldn't figure out what had gone wrong. She stormed out of the store, muttering curses under her breath.

When the technician was finally ready for me, it seemed to take him forever to enter all my data into the computer. So I sat down and waited some more. The phone rang and he had to answer it. More waiting. An optometrist came out of his exam room with another customer, and the "consultant" had to spend ten minutes looking up his information and processing his bill. Finally, 45 minutes later, the consultant gave me a quote for my replacement glasses. It was only fifty dollars more than the cost I had initially been quoted at my local optometrists. Thanks but no thanks, I told him. I really prefer to go local, even if I have to pay more. I can hardly imagine how they would have responded to a homeless veteran or a veteran with mental illness who would not be able to tolerate such long waits.

When I went down to the my local optometrist's, which actually is I just around the corner, the cost of my new glasses was actually a hundred dollars less than the price quoted at LensCrafters. There was no wait. The office was well with staffed two optometrists, a technician and a receptionist who was answering the phone. They had all my information, tightened my current pair of glasses, and gave me a new lens cloth and a bottle of lens cleaner for which they didn't charge. Plus they actually knew my name and my vision history.

As for outsourcing audiology, which VA leaders are also promoting, I can only say that my recent experience seeing a local, private sector ear, nose and throat (ENT) doctor was nothing like what I have observed watching veterans get audiology care in the VHA. The doctor did efficiently diagnosed my tinnitus (ringing in the ears) and hearing loss but had nothing to advise but that I grin and bear it and turn on classical music if it gets too bad. There was no discussion of the kind of special hearing aides the VHA routinely offers, no offer of tinnitus groups that could help if it got really bad and no information about the kind of risks that make tinnitus worse. On the other hand, just by observing VHA audiologists counseling their patients, I learned something that makes total sense but would never have occurred to me — that hair dryers can cause or aggravate that incessant whirl. I now use earplugs when I dry my hair, and have even convinced my local hair dresser to consider using them herself.

Although my experiences are only "anecdotal," they do raise questions about the purported greater efficiency and superiority outsourced services. Will veterans who receive these services be as disappointed as I was? Will they cost the taxpayer a whole lot more for a whole lot less? My glasses — just replacing the lenses — would have cost over \$500 at LensCrafters. They cost about \$360 at my local optometry shop. At the VA I am told glasses cost \$37. My advice to veterans is fight for what you have and to make it even better. If things go wrong at LensCrafters or the local ENT, veterans won't be able to call their congressional representatives and get swift action. Although most Americans don't realize it, that kind of accountability is only found in a government healthcare system like the VHA.

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3.15 - Northern Public Radio (Audio): [Regional VA Hospitals Adapt To Veterans Choice Program](#) (30 May, Chase Cavanaugh, 35k online visitors/mo; DeKalb, IL)

One of the key participants in the Choice Program is regional hospitals. We continue our examination of this program by talking with managers and administrators at two facilities serving veterans in northern Illinois.

The Choice Program is designed to help veterans who are trying to receive specialist care that is either too far away, or the wait time for an appointment is too long. Veterans interested in the program talk to either their primary doctors or local veteran assistance center. These people then refer the veterans to a regional VA hospital.

"If that's over 30 days or we don't offer that care, or it's over than 40 miles, then a consult is placed or they're referred to our department," says Carolina Mosely, Clinical Nurse Manager for the Office of Community Care at Edward Hines, Jr., Veterans Hospital in the Chicago suburb of Hines.

Professionals like her act as liaisons between patients and doctors but, at a national level, these arrangements go through two third-party contractors. Mosely says she guides eastern U.S. veterans to Health Net.

"We'll give them the website. They go in, they fill out the packet, and the patient can see that physician. If they choose not to do that, they can choose another physician off the providers list," she said, "and then we have our own list where we can sign that provider up also. We're creating a national, integrated set of providers."

Regional hospitals like Hines aren't allowed to create these databases on their own, which can make dealing with the contractors difficult. However, Dr. Alan Bridges, Chief of Staff at William S. Middleton Memorial Veterans Hospital in Madison, Wis., notes that Health Net and its counterpart TriWest still have a role to play.

"They set up these regions and these contracts," he said, "and that's the setup for the money exchange, the reimbursement."

Bridges says Congress didn't give much guidance to regional hospitals on how to assemble these regional offices. He also notes that lawmakers didn't allocate infrastructure funding for specific hospitals.

"The contractors, Health Net and TriWest, probably didn't have the infrastructure required to fully implement the program," he said. "In addition, they didn't have enough physicians."

To compensate, both Madison and Hines hired extra staff. Mosely explains how she set up her office at Hines.

"We hired some RNs, because I needed some nurses with varied backgrounds to be able to really, really make sure that my patients got the care they need," she said. "We hired some LPNs, and then we have administrative staff."

This makes Mosely's office about half clinical and half administrative, along with what she calls "intense case management." Hines serves Chicago and its suburbs, as well as sections of northern Illinois, so her office authorizes about 250 referrals each week.

Madison has just as wide a service area, extending into Illinois and part of Michigan's Upper Peninsula. However, Bridges said the Choice program hasn't exactly shortened veterans' wait times.

"Even though the VA may be beyond 30 days," he said, "we can often get a veteran in for care in 40 or 45 days -- which is before the private sector can get them in."

Dr. Steve Braverman, director at Hines Hospital, says veterans have caught on to this pattern.

"One of the interesting things that we've found is that, when we've offered Choice in many situations, our veterans have declined it because they prefer to get their care here even if it means a longer wait," he said.

Bridges also noted his hospital volume is higher than some regional counterparts because Wisconsin didn't expand Medicaid under the Affordable Care Act. He said VA care doesn't have monthly premiums.

"Veterans pay for an episode of care unless they're service-connected," he said. "Then they get that care for free."

It remains difficult for regional hospitals and private doctors to schedule appointments and properly share medical records. To fix this, the hospitals are "reinventing" the underlying systems at a national level. Mosely says this means changing the underlying technology.

"One of them will allow the outside providers to have access to the patients' information, like their actual chart, real time," she said.

That change is already under way, and other reforms aim to improve communication with these private doctors.

In the end, Bridges sees the Choice Program as a well-intentioned but flawed effort to get veterans the care they need. But he's still optimistic about upcoming reforms.

"As we're developing more infrastructure and getting better communication across the different program lines," he said, "I think that, going into the future, we should have a very, very good program that will allow the goals to be realized."

The U.S. Congress originally budgeted \$10 billion for the Choice Program, but it had a sunset date of August 7. However, President Donald Trump signed a law in April permitting the VA to spend the remaining funds until January 2018.

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3.16 – Northern Public Radio (Audio): [Tweaks Made To Veterans Choice, But Overhaul Remains Elusive](#) (30 May, Jenna Dooley, 35k online visitors/mo; DeKalb, IL)

Earlier this year, NPR analyzed the length of wait times for veterans to get appointments and treatment at Veterans Affairs medical facilities. Over the next few days, you will hear a Midwestern perspective on a federal program trying to improve veterans care.

Veterans Choice was established in 2014 to speed up the time it took for Veterans to get care. It came in the form of a \$16 billion influx to the department of Veterans Affairs. NPR's Quil Lawrence has been following the money to see how it was spent.

"There was a breakdown there of about \$10 billion going to what most people think of as the Choice Program," Lawrence explained. "That's \$10 billion to get vets appointments outside of the VA system."

The idea was that, for a short time, they would let veterans go outside of the system to take the pressure off the overloaded VA medical centers and overbooked VA doctors.

"There was also \$2.5 billion for hiring new doctors and nurses across the VA system," Lawrence said, "and that is most of the money that NPR followed."

The NPR analysis revealed wait times did not necessarily improve.

"There is a very complicated explanation for why," Lawrence said. "If you ask the VA, they say they saw a lot more people through Choice and they are still using outside-of-the-system doctors to see almost a third of their patients."

That was coupled with an overwhelming demand from both new veterans coming home from Iraq and Afghanistan with more complicated injuries and what Lawrence describes as "a demographic bulge of Vietnam and older veterans who are reaching an age where they need more medical care than they ever had before in their lives."

Lawrence says NPR cast a pretty wide net for those affected by the Choice program. "It wasn't too hard to find people who were involved in the process," Lawrence said. "We had 30,000 cases when we first did this investigation where veterans had gone to the Vets Choice program because they couldn't get to their local VA within 30 days."

He says that was one of the prerequisites to use the program.

"Then they would find the VA appointment they were about to have 45 days from now ended up being sooner and quicker than the Vets Choice appointment that they were making."

As a result, Lawrence says, a program that was supposed to solve the problem ended up being just as slow.

Extension Approved For Choice Program

In April, the Veterans Choice program was extended.

"There have been many tweaks to the program since it went through," Lawrence said.

He says these tweaks are often in the form of renegotiating the contract with third-party advisors. The VA went outside to hire people to do the customer service and coordination. They hired Health Net and TriWest to cover the entire country.

"They've changed their contract with those companies many times since the law passed," Lawrence said. "It seems to be working a little bit smoother now."

He says there may be some confusion about the extension; people might think of it as the government saying it was working great and they want to renew it.

The Vets Choice program was scheduled to expire in August. Lawrence says that meant veterans who needed authorization for a longer medical procedure would not have gotten it without the extension. "What they passed recently was just a stopgap funding measure to keep the people who are using Choice now going so they can keep getting treatment," Lawrence said.

Calls For Overhaul

Lawmakers on both sides of the political aisle, and at the VA, have said they want to reform Veterans Choice comprehensively. One lawmaker with a close relationship with the VA agrees changes are needed.

U.S. Senator Tammy Duckworth is an Iraq War Veteran and former Assistant Secretary of the Department of Veterans Affairs.

"I like the concept of it – I voted for the Choice program – but it's been very poorly executed," Duckworth said. "I'm here now in the Senate, working to try to fix the way the bureaucracy was set up around how to implement Choice so that it truly makes it easier for veterans – not harder."

Duckworth goes to the Hines VA for health care, but takes part in the Veterans Choice program for some of her women's health care. "For example, Hines does not have an obstetrics program. So I was referred to an outside provider for that, and I found that having the Choice program be administered out of Florida, where they don't know the local communities, the local health-care providers, made it really difficult."

"Figuring It Out As We Go"

Another criticism of the Veterans Choice program was that the benefits were not communicated very well to veterans or Veterans Affairs Commissions at the county level. These are the people who often help shepherd vets through their options or, in some cases, help find transportation for them to hospitals. They admit they've been trying to make the program work without much support. NPR's Quil Lawrence says the "workaround" mentality was seen nationwide.

"This was a system they set up in a rush. Congress gave them 90 days to set it up, it was unrealistic," Lawrence said. "There was a sense of urgency that there were veterans waiting too long and suffering. As a result, what came out was something that veterans couldn't understand very well. It hadn't been explained to them very well."

Additionally, he says doctors outside of the VA system couldn't understand it very well. "The third party administrators that the VA hired were very confusing for everyone to use; they didn't seem to understand the program very well. The VA itself didn't seem to understand the program very well. So, nobody understood it and that was a clear problem."

As we continue our series, "Veterans Choice: Making It Work," we'll hear from vets themselves, county officers tasked with supporting vets as they navigate their healthcare options, and from hospital administrators.

WNIJ's Victor Yehling contributed to this report.

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4. Women Veterans

5. Appeals Modernization

6. Strategic Partnerships

6.1 - FedScoop (Video): [Will Hurd says DOD-VA health record interoperability could set global standard](#) (30 May, 57k online visitors/mo; Washington, DC)

Rep. Will Hurd, R-Texas, believes that if the Pentagon and the Department of Veterans Affairs can reach meaningful interoperability between their electronic health records, it could set a new standard for the rest of the world.

Hurd, in a recent interview with FedScoop, describes true interoperability between the two departments as an area ripe for innovating within government.

"That could be the standard for the rest of the world," he explains. "And we can make sure we can start doing things like virtualized research cohorts, we can keep people alive longer. That's the kind of innovation government can be doing, but we're a long way away from achieving that reality."

Indeed, it's taken the two departments the better part of the past two decades to make progress so that when service members leave active duty, their health records will seamlessly travel with them as they become veterans.

"How do we get to where the private sector is, to be frank," Hurd says, explaining his definition of innovation. "Sometimes we need to raise our gaze ... to figure out how we should be providing services to our constituents that they haven't gotten."

Hurd leads the IT Subcommittee of the House Oversight and Government Reform Committee and recently penned the Modernizing Government Technology Act, which passed the House in May and now awaits movement in the Senate.

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7. Supply Chain Modernization

7.1 - Winston-Salem Journal: [IFB loses a round in legal fight over providing eyeglasses to veterans](#) (31 May, Richard Craver, 859k online visitors/mo; Winston Salem, NC)

A federal judge has ruled against IFB Solutions Inc. in its legal fight over which nonprofit group should have priority in providing eyeglasses to veterans.

However, the proposed final judgment, submitted Friday, does not prevent IFB of Winston-Salem from appealing and pursuing reconsideration of the judgment.

The legal fight involves the federal Veterans Administration as the defendant — with IFB joining as an intervenor — and PDS Consultants Inc. as the plaintiff.

The optical lab at IFB, formerly known as Winston-Salem Industries for the Blind Inc., is at the center of the fight with 52 jobs at stake — 45 filled by employees who are blind, including 43 locally, and seven filled by veterans, including three locally.

There is a possibility the local workforce could be affected as early as late summer.

Danny Kelly, IFB's chief operating officer, said Tuesday "our current understanding is this decision is not favorable, but the decision document is not yet publicly available due to a protective order."

"We are working closely with the National Industries for the Blind and sister NIB agencies. If there is a negative decision that puts jobs at risk for people who are blind, our intention is to appeal that decision, all the way to the U.S. Supreme Court if necessary."

The lab at 7730 North Point Blvd. makes eyeglasses for 34 VA facilities in five states, as well as selling eyeglasses to the public.

IFB's optical labs have served the VA since 2000. The local IFB optical lab was expanded in October 2015 at a \$1.1 million cost to better handle a new five-year supplier contract with the VA valued at \$1.7 million annually.

A bid protest was filed Aug. 25 by PDS against the federal government in the U.S. Court of Federal Claims.

PDS, based in Sparta, N.J., says it is a small business owned by a disabled service veteran. It has provided visual products to the VA since 1998.

At its essence, the legal case is about PDS' motion to require the federal government to enforce PDS' interpretation of the federal Veterans Benefits Act of 2006.

The act is considered one of the ways Congress recognizes and repays disabled veterans for their military service.

Also listed as a defendant is the independent federal agency known as the U.S. Committee for the Purchase From People Who Are Blind or Severely Disabled, also known as AbilityOne. That agency oversees the awarding of federal contracts with nonprofit agencies that train and employ people with disabilities.

PDS wants the opportunity to have priority status on AbilityOne's three optical network contracts with the VA.

The judgment would prevent the VA from entering any new eyewear contracts from the procurement lists unless it performs the "rule of two" analysis. The requirement holds that orders for visual-related products and services can be filled first by at least two small businesses owned by disabled veterans.

The caveat is that the analysis must "determine that there are not two or more qualified veteran-owned small businesses capable of performing the contracts. Such a business must meet production and distribution bidding requirements "at a fair and reasonable price that offers best value to the United States."

IFB said an injunction "would essentially shut down" the optical lab operations.

PDS cites a June 2016 ruling by the U.S. Supreme Court that reinforced — in a legal case known as *Kingdomware* — the rule of two requirement as "mandatory, not discretionary."

However, a policy memorandum issued by the VA in July 2016 does not direct VA contracting officers to give priority to veteran-owned businesses over AbilityOne products and services.

The federal government claims PDS is wrong in its assessment that Congress "intended to prioritize awards to veteran-owned businesses over any other statutory mandate for VA procurements."

Where IFB comes in is that PDS wants the federal government to review its "continued ordering" from AbilityOne for three Veterans Integrated Services networks, known by the acronym VISN.

The committee said in an Aug. 5, 2016, final rule that a fourth network would be required to use a National Industries for the Blind source as of Sept. 4, 2016.

PDS said ordering from AbilityOne violates the rule of two requirement. PDS argues "it would have a substantial chance to have received" earlier network contracts had it been allowed to bid.

One IFB contract, VISN 2, is set to expire Sept. 30.

The VISN 7 contract is set to expire July 31, but the VA has multiple options to extend the contract through Aug 1, 2021, which the VA said it will take the first option for at least 14 months.

The VA said it would conduct market research on the rule of two requirement on VISN 7 "with the goal of making a competitive award to a veteran-owned business by the expiration of the option.

The VA said it "believes its decision to exercise the first option, but begin the rule of two analysis for VISN 7 for a contract beginning after July 2018, is a reasonable approach to a timely implementation of the court's decision while minimizing the administrative impact to the VA and harm to Winston-Salem."

The proposed judgment said that “the defendants may request a suspension of any injunctive relief granted by the court’s judgment, pending an appeal decision.”

“Furthermore, the parties do not agree that the (VISN 7) plan is consistent with the spirit of the decision.”

Kelly said in November he believes “there is enough business with the VA for everyone, veteran-owned businesses, as well as AbilityOne agencies like IFB, to be successful.”

Kelly said he believes IFB’s VA contracts are not covered by the rule of two requirement because they were added to a procurement list by the AbilityOne commission under the federal Javits-Wagner-O’Day Act of 1938.

Kelly said that means its VA contracts “are considered other than competitive.”

PDS argues that the Veterans Benefits Act should hold priority over mandatory purchasing requirements in the Javits-Wagner-O’Day act.

The federal government has argued that “there is nothing in the Veterans Benefits Act to indicate that Congress sought to subordinate every statutory mandate to the VBA.”

“Instead, the act is silent, and the court should defer to the VA’s reasonable construction of the act.”

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7.2 - ExecutiveBiz: [Optum, VA Pick 3 Teams to Develop Medical Tech for Military Vets with Brain Injuries](#) (30 May, Scott Nicholas, 21k online visitors/mo; Vienna, VA)

The Department of Veterans Affairs and Optum have selected three finalists from the “Demo Day” competition of the 2nd annual Brain Trust: Pathways to InnoVAtion to pilot medical technologies that can help clinicians to prevent, diagnose or treat veterans who have experienced traumatic brain injuries.

Optum said Friday The Daptly Display, Save a Warrior and King-Devick Technologies were selected out of 15 teams who demonstrated new concepts, such as a software treatment platform and a virtual reality device, in front of a live audience and panel of judges.

“There are unbelievable opportunities to accelerate innovation to help veterans with brain injuries live healthier lives through public-private partnerships like the VA’s Brain Trust,” said Patty Horoho, CEO of Optum’s military and veterans group.

“We are honored to partner with the VA to help ensure our nation’s veterans get the quality care they need and deserve,” Horoho added.

The Brain Trust partnership convenes more than 350 participants from the federal government and the private sector with the goal to develop medical technologies and methods for the treatment of brain injuries, concussions and post-traumatic stress disorder.

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8. Other

8.1 - PBS (Video): [WATCH LIVE: Veterans Affairs Secretary Shulkin to speak at news briefing](#) (30 May, Erica R. Hendry, 23M online visitors/mo; Arlington, VA)

Secretary of Veterans Affairs David Shulkin will speak at a news briefing with reporters Wednesday in the White House.

Shulkin is expected to begin speaking at 11:30 a.m. EST Wednesday. Watch live in the player above.

The White House did not indicate what Shulkin will address. Earlier this month, Shulkin said he is considering closing more than 1,100 VA facilities nationwide, "as it develops plans to allow more veterans to receive medical care in the private sector."

On Monday, the AP reported the government was opening dozens of new investigations into possible opioid and drug theft from veterans' care facilities by VA employees.

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8.2 - The Philadelphia Inquirer: [Patient-safety advocate's widower asks that she be buried in national cemetery](#) (29 May, Valerie Russ, 11.8M online visitors/mo; Philadelphia, PA)

Amy Reed, a physician whose death last week followed a remarkably successful fight to end a once-routine medical practice that spread a cancer she didn't even know she had, died "a warrior's death," her husband and fellow activist said Monday.

Now Hooman Noorchashm hopes the Veterans Administration will allow Reed, 44, to be buried Thursday at Washington Crossing National Cemetery in Newtown, not far from their Yardley home.

But the family's request for the burial was denied Sunday by Ronald E. Walters, the Veterans Administration's interim undersecretary for memorial affairs.

Noorchashm appealed the decision to VA Secretary David Shulkin that night. "Honoring Dr. Amy Reed's valor and fall on the public health front would not diminish the heroic actions of our uniformed service members," he wrote.

Noorchashm, a cardiothoracic surgeon, said laws governing burial in national cemeteries permit interment of civilians there in certain circumstances. He said his wife's efforts to alert the the public, the medical establishment, and the Food and Drug Administration to the dangers of a surgical device known as an electric morcellator were consistent with the action of a warrior in uniform who also saves lives.